POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

09/ 936312

INDEX OF CLAIMS

✓	.... Rejected	N	....	Non-elected
=	.... Allowed	I	....	Interference
—	(Through numeral)... Canceled	A	....	Appeal
÷	.... Restricted	O	....	Objected

Claim (Final)	Claim (Original)	Date 9/5/15				Claim (Final)	Claim (Original)	Date						Claim (Final)	Claim (Original)	Date					
	1	✓					51								101						
	2	0					52								102						
	3	0					53								103						
	4	0					54								104						
	5	0					55								105						
	6	✓					56								106						
	7	✓					57								107						
	8	0					58								108						
	9	✓					59								109						
	10						60								110						
	11	✓					61								111						
	12	0					62								112						
	13	✓					63								113						
	14						64								114						
	15						65								115						
	16						66								116						
	17	✓					67								117						
	18	0					68								118						
	19						69								119						
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	48						98								148						
	49						99								149						
	50						100								150						

If more than 150 claims or 10 actions
staple additional sheet here

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